

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212551212					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: ADVANCED ORTHOPAEDIC CENTERS, P.C.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: THOMAS A GRANT 1001 HAXALL POINT 15TH FL RICHMOND, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 8/31/2012</p> <p>SCC ID NO: 01690452</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED			
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 7858 SHRADER RD EAST BUILDING</p> <p style="text-align: center;">CITY/ST/ZIP: RICHMOND, VA 23294</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: KENNETH R ZASLAV TITLE: PRESIDENT ADDRESS: 1512 WEST AVENUE CITY/ST/ZIP/CO: RICHMOND, VA 23220 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: KENNETH R ZASLAV TITLE: PRESIDENT ADDRESS: 1512 WEST AVENUE CITY/ST/ZIP/CO: RICHMOND, VA 23220	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: KENNETH R ZASLAV TITLE: PRESIDENT ADDRESS: 1512 WEST AVENUE CITY/ST/ZIP/CO: RICHMOND, VA 23220	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: WILLIAM D BRICKHOUSE TITLE: VICE PRESIDENT ADDRESS: 1927 HANOVER AVENUE CITY/ST/ZIP/CO: RICHMOND, VA 23059 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: WILLIAM D BRICKHOUSE TITLE: VICE PRESIDENT ADDRESS: 1927 HANOVER AVENUE CITY/ST/ZIP/CO: RICHMOND, VA 23059	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: WILLIAM D BRICKHOUSE TITLE: VICE PRESIDENT ADDRESS: 1927 HANOVER AVENUE CITY/ST/ZIP/CO: RICHMOND, VA 23059	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: ADAM CROWL TITLE: VICE PRESIDENT ADDRESS: 11924 BLAIRMONT PL CITY/ST/ZIP/CO: GLEN ALLEN, VA 23059 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: ADAM CROWL TITLE: VICE PRESIDENT ADDRESS: 11924 BLAIRMONT PL CITY/ST/ZIP/CO: GLEN ALLEN, VA 23059	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME:	MARION HERRING	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	300 SOUTH MOORELAND		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		
NAME:	ANDREW HOU	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	153 HAWK NEST COURT		
CITY/ST/ZIP/CO:	RICHMOND, VA 23227		
NAME:	DOUGLAS E JESSUP	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	573 FLATDUCK CROSSING		
CITY/ST/ZIP/CO:	MANAKIN-SABOT, VA 23103		
NAME:	THOMAS P. MCDERMOTT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	317 GREENWAY LANE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23226		
NAME:	STEVEN REECE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3213 GROVE AVENUE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23221		
NAME:	JOHN WILLIAM VAN MANEN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	10 TOW PATH LANE SOUTH		
CITY/ST/ZIP/CO:	RICHMOND, VA 23221		
NAME:	KEITH A GLOWACKI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	9625 SLOMAN PLACE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23238		
NAME:	JOHN BAUMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	7858 SHRADER ROAD		
CITY/ST/ZIP/CO:	EAST BUILDING RICHMOND, VA 23294		
NAME:	GEOFFREY B HIGGS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	7858 SHRADER RD		
CITY/ST/ZIP/CO:	EAST BUILDING RICHMOND, VA 23294		
NAME:	JOY V SHARMA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	7858 SHRADER RD		
CITY/ST/ZIP/CO:	EAST BUILDING RICHMOND, VA 23294		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JOHN BAUMAN	JOHN BAUMAN, CEO	4/19/2013	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.